Case: 1:15-cv-11233 Document #: 1-2 Filed: 12/14/15 Page 1 of 3 PageID #:13

EXHIBIT B



September 8, 2015

SEP 1 0 2015

Scottsdale Insurance Company P.O. Box 4110 Scottsdale, AZ. 85261

Attention: Mr. William Benson

RE: Lucious Harding -vs- M & M Logistics & Earving Cole

Date of Occurrence: February 24/2015

YOUR CLAIM NO. 01637731 OUR FILE/PINS NO. 225626

Dear Mr. Benson:

Enclosed herein please find items of special damages **TO DATE** with regard to my client as follows:

1.)	Advanced Physical Medicine	\$ 9,727.74
	-	7,000.00
2.)	Archer Open MRI	*
3.)	APM Surgical Group (4/1/15)	3,700.00
4.)	APM Surgical Group (4/17/15)	7,400.00
5.)	APM Surgical Group (4/29/15)	11,100.00
6.)	APM Surgical Group (6/1/15)	- 27,392.65
7.)	RM Anesthesia (4/1/15 & 4/17/15)	- 1,900.00
8.)	Pinnacle Interventional Pain (5/8/15 & 6/1/15)	7,295.00
9.)	St. Bernard Hospital	
10)	Universal Radiology, Ltd	350.00
11)	Foundation For Emergency Services	
12)	City of Chicago EMS	
13)	Ingalls Memorial Hospital	- 572.00
14)	Optech Orthotics	
15)	Wage loss verification	- 4,680.00
16)	Wage loss verification	- 3,974.35
		\$88,601.74
17)	Auto (deductible)	\$ 500.00
18)	Car rental	172.73
19)	Car rental	811.33
17,	Car Tollar	
		\$ 1,484.06



September 8, 2015 Page two (2) -cont.

My client continues under the care of Dr. Ronald Michael for the injury sustained in this accident, and <u>additional medical records/bills will be forthcoming</u>.

After your examination and evaluation of the enclosed, kindly contact my office to discuss this claim, and provide my office with your insured's policy limits pursuant to 215 ILCS 5/143.24b. Thank you in advance for your anticipated cooperation in this matter.

Very truly yours,

HARVEY L. WALNER & ASSOCIATES, LTD.

RV.

JONATBAN WAI NER

JW:ir

Encls. (Executed medical/wage authorizations attached)

CERTIFIED MAIL

RETURN RECEIPT REQUESTED